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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Sanford Reich et al.  
Serial No. : 10/500,391 (PCT/US03/00095)  
Filed : June 28, 2004 (2 January 2003)  
For : DIAGNOSTIC ALGORITHMS FOR A CSF PHYSIOLOGIC  
CONTROLLER  
Examiner : Not yet assigned  
Art Unit : Not yet assigned  
Attorney :  
Docket No. : 642P002-US

#4

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Mail Stop: PCT

Sir: RESPONSE TO NOTICE OF MISSING REQUIREMENTS

As noted in the Transmittal Letter filed with the above identified application, no Declaration of the inventors were transmitted therewith. Applicants have been awaiting the customary "Notification: Missing Requirements Under 35 U.S.C. 371 and 37 CFR 1.494 or 1.495", but it has not been received. To guard against the possibility that it was sent by the PTO but not received by applicant, there are filed herewith the following items:


1. The relevant surcharges for filing the executed Declaration and English translation late have already been paid. A copy of the letter of Transmittal filed on June 28, 2004 enclosing the relevant surcharge is attached hereto.
2. A properly signed Declaration of the Applicants for DO/EO/US and Power of Attorney (4-Pages).

The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account 14-0930.

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Signature: Kevin S. Lemack  
Date: September 7, 2004

Respectfully submitted,

  
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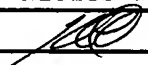
PTO/SB/21 (08-03)


Approved for use through 07/31/2006. OMB 0651-C031  
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/500,391	
	Filing Date	June 28, 2004	
	First Named Inventor	Sanford Reich	
	Art Unit	Not yet assigned	
	Examiner Name	Not yet assigned	
Total Number of Pages in This Submission	8	Attorney Docket Number	642P002-US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Copy of transmittal letter filed 6/28/04 showing surcharge paid. -Executed Declaration
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kevin S. Lemack Niels & Lemack
Signature	
Date	September 7, 2004

CERTIFICATE OF TRANSMISSION/MAILING	
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Typed or printed name	Kevin S. Lemack
Signature	
Date	Sept. 7, 2004

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